PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrects maintenance fee notifica	ed below or directed oth	nerwise in Block 1, by (a	a) specifying a new con	espondence address	; and/or (b	o) indicating a sep	arate "FEE ADDRESS"	for	
CURRENT CORRESPOND	Fe	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
45601	7590 03/31	/2008	111			_	emicsion		
SCULLY, SCO 400 GARDEN O Suite 300	I So ac tr	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
GARDEN CITY	, NY 11530			(Dapositor's name)					
						><	(Signatur	(c)	
							(Dat	c)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORN	EY DOCKET NO.	CONFIRMATION NO.	7	
10/710,847	10/710,847 08/06/2004		Anil K. Chinthakindi	thakindi 56/83/28UR9200401			6756	_	
TITLE OF INVENTION	: FEOL/MEOL METAL	RESISTOR FOR HIGH	END CMOS	01 F	C: 1501 C: 1504	1446.00 360.00	DA	347	
- APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1440	\$300	\$0		\$1740	06/30/2008		
EXAM	INER	ART UNIT	CLASS-SUBCLASS]					
CHIU,		2822	257-350000					_	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form 			(1) the names of up or agents OR, alterna (2) the name of a sin registered attorney o	printing on the patent front page, list enames of up to 3 registered patent attorneys nts OR, alternatively. IScully, Scott, Murphy & Presser, P.C aname of a single firm (having as a member a med attorney or agent) and the names of up to					
Number is required.	2 or more recent) attach	2 registered patent attorneys or agents. If no name is 3Richard Kotulak, Esclisted, no name will be printed.							
		A TO BE PRINTED ON	-						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
International Business Machines Corporation Armonk, New York									
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🗷 C	orporation	or other private gr	oup entity Governme	nt	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.									
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.									
Advance Order -	# of Copies		The Director is here overpayment, to De	by authorized to cha posit Account Numb	rge the requ	uired fee(s), any de 156/ (enclose a	eficiency, or credit any an extra copy of this form))	
_ ` .	tus (from status indicates s SMALL ENTITY state	b. Applicant is no lo	IBM t is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other than Office.	the applicant; a reg	istered atto	orney or agent; or t	he assignee or other party	in	
Authorized Signature	Otin)	2-		Date May	30, 2	800		_	
Typed or printed nam	_e Steven Fisc		Registration I	No. 34,	594				
an application. Confiden submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this bu //irginia 22313-1450. DC 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to th	1.14. This collection is a depending upon the ince Chief Information Off COMPLETED FORMS	estimated to take 12 ividual case. Any concer, U.S. Patent and TO THIS ADDRES:	minutes to omments of Trademarks. SEND T	complete, including the amount of the Amount of the Amount of the Koffice, U.S. Depro: Commissioner	d by the USPTO to procesting gathering, preparing, a me you require to complesartment of Commerce, P. for Patents, P.O. Box 1451 number.	nd ete .O.	
	, 10, 10, 0, 17,55, 110	randa at requires to to	-r - 3 = 10 = 0 0 110 0 0 0 0 1		·			_	

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEEE ADDRESS" for

maintenance fee notifica		herwise in Block I, by (a) specifying a new co	rrespondence address	; and/or (b)	indicating a sepa	rate "FEE ADDRESS" for		
CURRENT CORRESPOND		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
45601	7590 03/31	1/2008		nave its own certificate	of mailing o	or transmission.			
400 GARDEN (Suite 300		PRESSER, P.C.] : :	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
GARDEN CITY	Y, NY 11530	•	Ì				(Dopositor's name)		
						><	(Signature)		
							(Date)		
APPLICATION NO.	FILING DATE	· ·	FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/710,847	10/710,847 08/06/2004		Anil K. Chinthakindi		BUR920040112US1		6756		
TITLE OF INVENTION	: FEOL/MEOL METAL	RESISTOR FOR HIGH	END CMOS		,				
APPLN, TYPE	SMALL ENTITY	IȘSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSUI	E FEE TO	TAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1440	\$300	\$0		\$1740	06/30/2008		
EXAM	INER	ART UNIT	CLASS-SUBCLASS						
CHIU,		2822	257-350000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 			2. For printing on the patent front page, list (1), the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of the local form (horizon a graphus) (2) the name of the local form (horizon a graphus) (3) the name of the local form (horizon a graphus) (4) the name of the local form (horizon a graphus) (5) the name of the local form (horizon a graphus) (6) the name of the patent front page, list (1) the names of up to 3 registered patent attorneys (1) the names of up to 3 registered patent attorneys (1) the names of up to 3 registered patent attorneys (2) the names of up to 3 registered patent attorneys (3) the names of up to 3 registered patent attorneys (4) the names of up to 3 registered patent attorneys (5) the names of up to 3 registered patent attorneys (6) the names of up to 3 registered patent attorneys (7) the names of up to 3 registered patent attorneys (8) the name of up to 3 registered patent attorneys (9) the name of up to 3 registered patent attorneys (9) the name of up to 3 registered patent attorneys (9) the name of up to 4 registered patent attorneys (9) the name of up to 4 registered patent attorneys (9) the name of up to 4 registered patent attorneys (10) the name of up to 4 registered patent attorneys (11) the name of up to 4 registered patent attorneys (12) the name of up to 4 registered patent attorneys (13) the name of up to 4 registered patent attorneys (14) the name of up to 4 registered patent attorneys (15) the name of up to 4 registered patent attorneys (15) the name of up to 4 registered patent attorneys (16) the name of up to 5 registered patent attorneys (17) the name of up to 5 registered patent attorneys (18) the name of up to 5 registered patent attorneys (18) the name of up to 6 registered patent attorneys (18) the name of up to 6 registered patent attorneys (18) the name of up to 6 registered patent attorneys (18) the name of up to 6 registered patent attorneys (18) the name of up to 6 registered patent attorneys (18) the name of up to 6 register						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney of	f a single firm (having as a member a ray or agent) and the names of up to tent attorneys or agents. If no name is will be printed. 2 3 Richard Kotulak, Esq. will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or	type)					
PLEASE NOTE: Unl recordation as set forth	ess an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing	patent. If an assigne an assignment.	ee is identific	ed below, the do	cument has been filed for		
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Internatio	onal Business	Machines Cor	rporation	Armonk, I	New Yor	k			
Please check the appropri	ate assignee category or	categories (will not be pri	inted on the patent):	☐ Individual 🚨 Co	rporation or	other private grou	up entity Government		
4a. The following fee(s) a	are submitted:	4b	Payment of Fee(s): (P		y previously	paid issue fee sl	hown above)		
☑ Publication Fee (N	o small entity discount p	ermitted)	Payment by credit	ard. Form PTO-2038	is attached.		•		
Advance Order - #	of Copies		The Director is here overpayment, to De	by authorized to charge posit Account Numbe	ge the require	ed fee(s), any defi 6/ (enclose an	iciency, or credit any extra copy of this form).		
	us (from status indicated SMALL ENTITY statu		☐ b. Applicant is no l	onger claiming SMAL	IBM LENTITY s	tatus. See 37 CF	R 1.27(g)(2).		
NOTE: The Issue Fee and	Publication Fee (if requeecords of the United State	nired) will not be accepted tes Patent and Trademark	from anyone other tha				assignee or other party in		
Authorized Signature	Atentia	0		Date May	30, 200	08			
•	Steven Fisc	Date May 30, 2008 Registration No. 34,594							
nis forni antvoi suggesti Box 1450, Alexandria, Vi Alexandria, Virginia 2231	irginia 22313-1450. DO 13-1450.	FR 1.311. The information U.S.C. 122 and 37 CFR 1 USPTO. Time will vary den, should be sent to the NOT SEND FEES OR Corresons are required to res	COMPLETED FORMS	r retain a benefit by the estimated to take 12 m lividual case. Any con icer, U.S. Patent and 1 TO THIS ADDRESS.	ne public which inutes to continutes to continutes on the frademark Of SEND TO:	ch is to file (and l mplete, including te amount of time ffice, U.S. Depar Commissioner fo	by the USPTO to process) gathering, preparing, and e you require to complete timent of Commerce, P.O. or Patents, P.O. Box 1450, number.		